

Informational Bulletin

FY 94-23

June 1994

■ Filing Form MFUT-15, IFTA Motor Fuel Use Tax Quarterly Return

T0:| Illinois IFTA Motor **Carriers**

All qualified motor carriers registered under the Illinois IFTA Program are required to file Form MFUT-15, IFTA Motor Fuel Use Tax Quarterly Return. This return is used to report the number of miles traveled and the number of gallons of fuel purchased and consumed during each quarter and to pay any tax due.

We would like to bring to your attention several areas on the return we have identified that may cause processing delays if not correctly completed. When you complete and file your returns properly, you can avoid billing notices that may include penalty and interest charges.

Please use this bulletin as a guide when you file Form MFUT-15.

For a sample return and additional information, see the following pages.

What should I do to ensure that my returns are properly filed?

To ensure timely processing of your returns, you should

use only the preprinted Form MFUT-15 we send you for each quarter

Tax rates may change from quarter to quarter. If you use only the preprinted return identified for each quarter, you can be sure you are using the correct rates. If you do not have the correct preprinted return for a quarter, please call us.

Note: You may no longer file annually.

complete all information requested

> Carefully read the instructions for each section, and fill in all required information. If you have any questions, please call us.

- return all fuel summaries
- make the proper corrections to your fuel summaries when necessary
 - If you did not use a fuel type indicated on a summary, write "zero" under Items A and B.

- If you did not have any operations during a quarter, write "no operations" at the top of the fuel summary.
- If we sent you an incorrect fuel summary, write "no vehicles with this fuel" at the top of the fuel summary.
- round miles to the nearest whole mile and gallons to the nearest whole gallon
- pay the entire amount due To avoid billing notices and penalty and interest charges, please pay the entire amount due. Note: You are required to pay any amount due that is greater than zero.
- sign your return We cannot process your return unless it has the signature of the owner, a partner, a corporate officer, or an authorized preparer.

Questions?

If you have questions or need more information, please call or write us. Our telephone numbers and address are printed at the bottom of this bulletin.

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> CALL: 217 785-1397

> > TDD teletype device for hearing impaired only 1 800 544-5304

WRITE: Illinois Department of Revenue, Motor Fuel Use Tax Section, P.O. Box 19477, Springfield, IL 62794-9477

FOR INFORMATION... Check if your entire fleet had absolutely **no** miles (your vehicles were not driven at all) in **any** jurisdiction during the quarter.

Check if your company is going out of business or will no longer be registered under the Illinois IFTA Program. Write in the effective date of cancellation. You may receive another return for the next quarter depending on when your cancellation was processed. If so, you must complete and file that return.

If the fuel types we have checked are not correct for your fleet, please call us immediately so that we may send you the appropriate fuel summaries with the correct tax rates.

Carry only the net due (fuel summary Column L total) to these lines.

If you have any questions about a preprinted amount on Line 2, please call us.

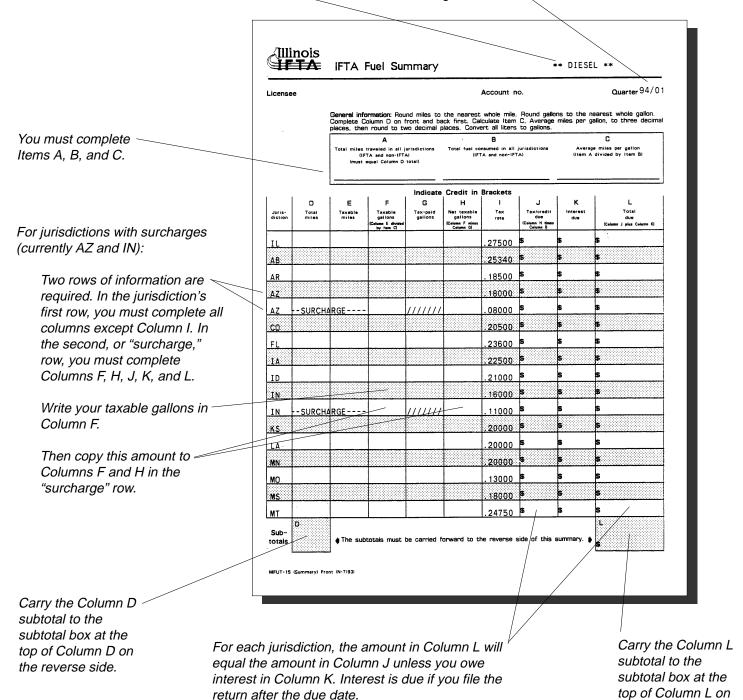
Pay the entire amount due. You are required to pay any amount due that is greater than zero. Indicate any credit or refund in brackets or parentheses.

Sign your return.

Illinois MFUT-15 IFTA Motor Fuel Use Tax Quarterly Return	
Licensee name and mailing address	Account no:
	Report qualter: 94/01 Due date: 04/30/94
Part 1: Tell us your filing status (Check all the X Quarterly filing Amended No operation	,
<u>`</u>	fied petroleum gas (LPG) Compressed natural gas (CN
You are required to complete a fuel summary for each fu changed your operations, you must contact us for further	uel type in your fleet, even if there was no activity. If you have instructions. Complete all fuel summaries before proceeding.
Part 3: Figure your total tax due or credit of	claimed
1 Carry forward the total due from Column L of each fuel summary. (Indicate any credits in brackets.) LPG Diesel Gasoline Gasohol LPG	\$ \$ \$
CNG 2 Credit or balance due carried forward from preceding qualified after the cumulative total for Lines 1 and 2 4 If your return is filed after the due date listed above, filed (10% c.10) of the Line 3 amount or \$50, whichever is 5 Write your total due or refund claimed. Any balance due Indicate any refund in brackets. (Verified refunds of \$21 Verified refunds of less than \$25 will be credited to you	igure your penalty. greater) 4 \$ must be paid in full with this return. 5 or greater will be issued autometically. ur next quarter's return.) 5 \$
Make your check payable to "Illinois Depai (Please write your account number and reporting period 6 Attach all fuel summaries to this page.	
Part 4: Sign below Under penalties of perjury, I state that I have examined thand complete.	is return and, to the best of my knowledge, it is true, correc
Owner or officer's signature	Signature of preparer other than taxpayer
Title	Address
Phose Date Meil to: ATTN MOTOR FUEL USE TAX SECTION ILLINOIS DEPARTMENT OF REVENUE	Phose If you have any questions, call 217 785-1397.

Make sure you have the correct type of fuel preprinted on your fuel summary. If you do not have the correct fuel summary, please call us.

Use only the original fuel summaries we send you. Make sure the fuel summary shows the correct quarter. If you do not have the correct fuel summary, please call us. Do not use copies from another quarter; you run the risk of using the wrong tax rates.



If you have no activity in an IFTA jurisdiction, leave the row for that jurisdiction blank; do not write in zeros.

When you send us your fuel summaries, be sure also to include the MFUT-15 return (see the example on the previous page).

the reverse side.

